Michigan Department of State

COMMERCIAL DRIVER LICENSE CERTIFICATION

| Full Name: (Please Print) | Date of Birth: |
|---------------------------|---------------------------|
| Driver License Number: | * Social Security Number: |

| I am applying for the following Commercial Driver License (CDL): | | | | | | | | | |
|--|---|--|---|--------------|------------------|------|--|--|--|
| CDL GROUP DESIGNATOR: (Choose only one.) You are responsible for knowing the gross vehicle weight rating (GVWR) or the gross combination weight rating (GCWR) of the vehicle(s) you drive. | | | | | | | | | |
| A vehicle towing a vehicle or trailer with a gross vehicle weight rating (GVWR) of 10,001 pounds or more when the gross combination weight rating (GCWR) is 26,001 pounds or more. A vehicle with a GVWR of 26,001 pounds or more. A sing or less The Group B allows for towing trailers or other vehicles with a gross vehicle weight rating (GVWR) of 10,000 transpounds or less. Where the gross combination weight rating trailers or other vehicles with a gross vehicle weight rating (GVWR) of 10,000 transpounds or less. | | or less or a vehicl or less towing a t transport (16) or a driver, or to carry | GROUP C A single vehicle with a GVWR of 26,000 pounds or less or a vehicle with a GVWR of 26,000 pounds or less towing a trailer or other vehicle and used to transport (16) or more passengers, including the driver, or to carry hazardous material in amounts requiring a placard. | | | | | | |
| CDL ENDORSEMENTS: (Choose as many as you need.) | | | | | | | | | |
| | H – HAZARDOUS MATERIALS - Needed to carry hazardous materials in amounts requiring a placard. | | | | | | | | |
| N – TANKERS - Needed to haul liquids or liquefied gases in permanently mounted cargo tanks rated at 119 gallons or more or portable cargo tanks rated at 1,000 gallons or more. | | | | | | | | | |
| P – PASSENGER VEHICLES - Needed to operate any vehicle designed to carry 16 or more people, including the driver. | | | | | | | | | |
| | S – SCHOOL BUS - Needed to operate a school bus with a capacity of 16 passengers or more, including the driver. Must be obtained in conjunction with a P endorsement. | | | | | | | | |
| T – DOUBLE TRAILERS - Needed when towing two trailers with a single power unit. | | | | | | | | | |
| CDI | RESTRICTIONS: (Choose only one) | | | | | | | | |
| | The vehicle I will operate is: | Equipped with air brakes Not equipped | ed with air brakes | (Restriction | Code 28) | | | | |
| DRIVER CERTIFICATION: Please answer all of the following questions. Your driving record will be verified before vou take any tests. A starred (*) response to one or more of these questions will disqualify you from obtaining a CDL. | | | | | | | | | |
| 1. | Do you reside at a permanent Michigan address | with the intention of remaining in Michigan? | | Yes | | No * | | | |
| 2. | | state? (Section 257.301 of the Michigan Vehicle Code ales prohibit drivers from having more than one driver licens | se.) | Yes | | No | | | |
| 3. | Are you currently disqualified or suspended from | n operating commercial motor vehicles in Michigan or any se | tate? | Yes * | | No | | | |
| 4. | Is your driving privilege currently suspended, rev | oked, denied, or canceled in Michigan or any state? | | Yes * | | No | | | |
| 5. | Will you be driving a commercial motor vehicle If yes, please answer question # 5a. If no, go dire | | | Yes | | No | | | |
| 5a. | | s stated in 49 CFR Part 391 of the Federal Safety Rules? ical Examiner's Certificate (DOT card) or medical waiver. | | Yes | | No * | | | |
| 6. | Will you be driving a commercial motor vehicle | only within the state of Michigan (intrastate operation)? | | Yes | | No | | | |
| 6a. | (1963 PA 181), Michigan Pupil Transportation A Transportation Act (1982 PA 432)? | - | | Yes | | No * | | | |
| | Unless exempt, this includes having a valid Med | ical Examiner's Certificate (DOT or School Bus card) or m | edical waiver. | | | | | | |
| 7. | If required, is the vehicle that you will use for the operate, once licensed? | e CDL skills test representative of the vehicle that you will | | Yes | | No | | | |
| I certify the information disclosed on this form is true. I understand making a false statement when applying for a driver license is a crime. | | | | | | | | | |
| Signature: X Date: | | | | | | | | | |

^{*} Disclosure of your Social Security number is required by Section 257.307(1)(b) of the Michigan Vehicle Code (P.A. 300 of 1949). This information will be used for commercial driver identification purposes in accordance with Section 383.153(d) of the Federal Motor Carrier Safety Regulations.